CRYSTAL RIVER NURSING/REHABILITATION

P. O. BOX 439

54981 Phone: (715) 258-8131 Ownership: Corporation WAUPACA Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): 77 Total Licensed Bed Capacity (12/31/02): 77 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/02: 74 Average Daily Census: 73

| Services Provided to Non-Residents             | Age, Sex, and Primary Diagn | Length of Stay (12/31/02)  |       |           |       |                           |           |  |
|--|-----------------------------|----------------------------|-------|-----------|-------|---------------------------|-----------|--|
| Home Health Care Supp. Home Care-Personal Care |                             | Primary Diagnosis          |       |           |       |                           | 40.5      |  |
| Supp. Home Care-Household Services             |                             | Developmental Disabilities |       | Under 65  |       |                           | 9.5       |  |
| Day Services                                   | Yes                         | Mental Illness (Org./Psy)  | 5.4   | 65 - 74   | 12.2  |                           |           |  |
| Respite Care                                   | Yes                         | Mental Illness (Other)     | 5.4   | 75 - 84   | 31.1  |                           | 100.0     |  |
| Adult Day Care                                 | Yes                         | Alcohol & Other Drug Abuse | 0.0   | 85 - 94   | 43.2  | *********                 | *****     |  |
| Adult Day Health Care                          | No                          | Para-, Quadra-, Hemiplegic | 0.0   | 95 & Over | 6.8   | Full-Time Equivalent      |           |  |
| Congregate Meals                               | Yes                         | Cancer                     | 1.4   |           |       | Nursing Staff per 100 Res | Residents |  |
| Home Delivered Meals                           | Yes                         | Fractures                  | 10.8  |           | 100.0 | (12/31/02)                |           |  |
| Other Meals                                    | No                          | Cardiovascular             | 21.6  | 65 & Over | 93.2  |                           |           |  |
| Transportation                                 | No                          | Cerebrovascular            | 9.5   |           |       | RNs                       | 13.3      |  |
| Referral Service                               | No                          | Diabetes                   | 8.1   | Sex       | %     | LPNs                      | 7.4       |  |
| Other Services                                 | No                          | Respiratory                | 5.4   |           |       | Nursing Assistants,       |           |  |
| Provide Day Programming for                    |                             | Other Medical Conditions   | 32.4  | Male      | 29.7  | Aides, & Orderlies        | 45.0      |  |
| Mentally Ill                                   | No                          |                            |       | Female    | 70.3  |                           |           |  |
| Provide Day Programming for                    |                             |                            | 100.0 |           |       |                           |           |  |
| Developmentally Disabled                       | No                          |                            |       |           | 100.0 |                           |           |  |
| **********                                     | ****                        | ********                   | ***** | *****     | ***** | ******                    | *****     |  |

## Method of Reimbursement

|                    |      | Medicare Medicaid (Title 18) (Title 19) |                     |     | Other |                     |     |     | Private<br>Pay      |     |       | Family<br>Care      |     |       | Managed<br>Care     |     |     |                     |                         |       |
|--------------------|------|---|---------------------|-----|-------|---------------------|-----|-----|---------------------|-----|-------|---------------------|-----|-------|---------------------|-----|-----|---------------------|-------------------------|-------|
| Level of Care      | No.  | 00                                      | Per<br>Diem<br>(\$) | No. | olo   | Per<br>Diem<br>(\$) | No. | 0/0 | Per<br>Diem<br>(\$) | No. | 90    | Per<br>Diem<br>(\$) | No. | 0/0   | Per<br>Diem<br>(\$) | No. | olo | Per<br>Diem<br>(\$) | Total<br>Resi-<br>dents | Of    |
| Int. Skilled Care  | 0    | 0.0                                     | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Skilled Care       | 12   | 100.0                                   | 282                 | 42  | 93.3  | 105                 | 0   | 0.0 | 0                   | 16  | 100.0 | 141                 | 1   | 100.0 | 105                 | 0   | 0.0 | 0                   | 71                      | 95.9  |
| Intermediate       |      |   |                     | 3   | 6.7   | 87                  | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 3                       | 4.1   |
| Limited Care       |      |   |                     | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Personal Care      |      |   |                     | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Residential Care   |      |   |                     | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Dev. Disabled      |      |   |                     | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Traumatic Brain In | j 0  | 0.0                                     | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Ventilator-Depende | nt 0 | 0.0                                     | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0                       | 0.0   |
| Total              | 12   | 100.0                                   |                     | 45  | 100.0 |                     | 0   | 0.0 |                     | 16  | 100.0 |                     | 1   | 100.0 |                     | 0   | 0.0 |                     | 74                      | 100.0 |

Receiving Psychoactive Drugs 63.5

County: Waupaca CRYSTAL RIVER NURSING/REHABILITATION

\* Admissions, Discharges, and | Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02 % Needing Percent Admissions from: Other Locations Rehabilitation Hospitals 0.0 | Total Number of Discharges | With Pressure Sores | With Rashes (Including Deaths) | 111 | Other Resident Characteristics 1.4 Have Advance Directives 1.4 Medications 78.4

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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

| ***************************************             |          |       |          |       |       |            |         |            |       |  |  |  |
|---|----------|-------|----------|-------|-------|------------|---------|------------|-------|--|--|--|
|   |          | Own   | ership:  |       | Size: |            | ensure: |            |       |  |  |  |
|   | This     | Pro   | prietary | 50    | -99   | Ski        | lled    | All        |       |  |  |  |
|   | Facility | Peer  | Group    | Peer  | Group | Peer Group |         | Facilities |       |  |  |  |
|   | 00       | %     | Ratio    | ଚ     | Ratio | olo        | Ratio   | olo        | Ratio |  |  |  |
| Occupancy Rate: Average Daily Census/Licensed Beds  | 94.2     | 85.1  | 1.11     | 88.5  | 1.06  | 86.7       | 1.09    | 85.1       | 1.11  |  |  |  |
| Current Residents from In-County                    | 83.8     | 75.4  | 1.11     | 72.5  | 1.16  | 69.3       | 1.21    | 76.6       | 1.09  |  |  |  |
| Admissions from In-County, Still Residing           | 21.1     | 20.1  | 1.05     | 19.5  | 1.08  | 22.5       | 0.94    | 20.3       | 1.04  |  |  |  |
| Admissions/Average Daily Census                     | 156.2    | 138.3 | 1.13     | 125.4 | 1.25  | 102.9      | 1.52    | 133.4      | 1.17  |  |  |  |
| Discharges/Average Daily Census                     | 152.1    | 139.7 | 1.09     | 127.2 | 1.20  | 105.2      | 1.44    | 135.3      | 1.12  |  |  |  |
| Discharges To Private Residence/Average Daily Censu | ıs 67.1  | 57.6  | 1.16     | 50.7  | 1.32  | 40.9       | 1.64    | 56.6       | 1.19  |  |  |  |
| Residents Receiving Skilled Care                    | 95.9     | 94.3  | 1.02     | 92.9  | 1.03  | 91.6       | 1.05    | 86.3       | 1.11  |  |  |  |
| Residents Aged 65 and Older                         | 93.2     | 95.0  | 0.98     | 94.8  | 0.98  | 93.6       | 1.00    | 87.7       | 1.06  |  |  |  |
| Title 19 (Medicaid) Funded Residents                | 60.8     | 64.9  | 0.94     | 66.8  | 0.91  | 69.0       | 0.88    | 67.5       | 0.90  |  |  |  |
| Private Pay Funded Residents                        | 21.6     | 20.4  | 1.06     | 22.7  | 0.95  | 21.2       | 1.02    | 21.0       | 1.03  |  |  |  |
| Developmentally Disabled Residents                  | 0.0      | 0.8   | 0.00     | 0.6   | 0.00  | 0.6        | 0.00    | 7.1        | 0.00  |  |  |  |
| Mentally Ill Residents                              | 10.8     | 30.3  | 0.36     | 36.5  | 0.30  | 37.8       | 0.29    | 33.3       | 0.32  |  |  |  |
| General Medical Service Residents                   | 32.4     | 23.6  | 1.38     | 21.6  | 1.50  | 22.3       | 1.45    | 20.5       | 1.58  |  |  |  |
| Impaired ADL (Mean)                                 | 40.8     | 48.6  | 0.84     | 48.0  | 0.85  | 47.5       | 0.86    | 49.3       | 0.83  |  |  |  |
| Psychological Problems                              | 63.5     | 55.2  | 1.15     | 59.4  | 1.07  | 56.9       | 1.12    | 54.0       | 1.18  |  |  |  |
| Nursing Care Required (Mean)                        | 7.1      | 6.6   | 1.07     | 6.3   | 1.13  | 6.8        | 1.04    | 7.2        | 0.99  |  |  |  |
|   |          |       |          |       |       |            |         |            |       |  |  |  |